

## APPLICATION DATA SHEET

## APPLICATION INFORMATION

Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?:: NONE  
Title:: CONDENSED HETEROCYCLIC  
Attorney Docket Number:: COMPOUNDS  
255578US0PCT

## INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Junya  
Family Name:: ISHIDA  
City of Residence:: Osaka  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi  
City of Mailing Address:: Osaka  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 541-8514

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Kouji  
Family Name:: HATTORI  
City of Residence:: Osaka  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi  
City of Mailing Address:: Osaka  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 541-8514

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Yoshiyuki
Family Name::	KIDO
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
City of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	541-8514
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Hirofumi
Family Name::	YAMAMOTO
City of Residence::	Osaka
Country of Residence::	Japan
Street of Mailing Address::	c/o Fujisawa Pharmaceutical Co., Ltd., 4-7, Doshomachi 3-chome, Chuo-ku, Osaka-shi
City of Mailing Address::	Osaka
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	541-8514

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number::	22850
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#### REPRESENTATIVE INFORMATION

Representative Customer Number::	22850
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#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP03/00708	01/27/03

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
PS 0197	Australia	01/29/02	YES

**ASSIGNMENT INFORMATION**

Assignee Name:: FUJISAWA PHARMACEUTICAL CO., LTD.

Street of Mailing Address:: 4-7, Doshō-machi 3-chome, Chuo-ku, Osaka-shi

City of Mailing Address:: Osaka

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 541-8514